

U. SCALE FOR THE ASSESSMENT OF NEGATIVE SYMPTOMS (SANS)

See SANS Manual for detailed coding definitions (N. Andreasen, 1984).

INTERVIEWER: Ratings are to be based on the last 30 days.

	NONE							SEVERE	UNK
AFFECTIVE FLATTENING OR BLUNTING									
1. Unchanging Facial Expression The patient's face appears wooden--changes less than expected as emotional content of discourse changes.	0	1	2	3	4	5		U	
2. Decreased Spontaneous Movements The patient shows few or no spontaneous movements, does not shift position, move extremities, etc.	0	1	2	3	4	5		U	
3. Paucity of Expressive Gestures The patient does not use hand gestures or body position as an aid in expressing his ideas.	0	1	2	3	4	5		U	
4. Poor Eye Contact The patient avoids eye contact or "stares through" interviewer even when speaking.	0	1	2	3	4	5		U	
5. Affective Nonresponsivity The patient fails to laugh or smile when prompted.	0	1	2	3	4	5		U	
6. Inappropriate Affect The patient's affect is inappropriate or incongruous, not simply flat or blunted.	0	1	2	3	4	5		U	
7. Lack of Vocal Inflections The patient fails to show normal vocal emphasis patterns, is often monotonic.	0	1	2	3	4	5		U	
8. Global Rating of Affective Flattening This rating should focus on overall severity of symptoms, especially unresponsiveness, inappropriateness and an overall decrease in emotional intensity.	0	1	2	3	4	5		U	

ALOGIA

9. Poverty of Speech The patient's replies to questions are restricted in <u>amount</u> , tend to be brief, concrete, unelaborated.	0	1	2	3	4	5		U	
10. Poverty of Content of Speech The patient's replies are adequate in amount but tend to be vague, over concrete or over generalized, and convey little in information.	0	1	2	3	4	5		U	

SANS CODES		
0 = None/Not at All	3 = Moderate	U = Unknown/
1 = Questionable	4 = Marked	Cannot Be Assessed/
2 = Mild	5 = Severe	Not Assessed

U. SANS (Cont'd)

	<u>NONE</u>	—————▶					<u>SEVERE</u>	<u>UNK</u>
11. Blocking The patient indicates, either spontaneously or with prompting, that his train of thought was interrupted.	0	1	2	3	4	5	U	
12. Increased Latency of Response The patient takes a long time to reply to questions, prompting indicates the patient is aware of the question.	0	1	2	3	4	5	U	
13. Global Rating of Alogia The core features of alogia are poverty of speech and poverty of content.	0	1	2	3	4	5	U	

AVOLITION/APATHY

14. Grooming and Hygiene The patient's clothes may be sloppy or soiled, and he may have greasy hair, body odor, etc.	0	1	2	3	4	5	U
15. Inpersistence at Work or School The patient has difficulty seeking or maintaining employment, completing school work, keeping house, etc. If an inpatient, cannot persist at ward activities, such as OT, playing cards, etc.	0	1	2	3	4	5	U
16. Physical Anergia The patient tends to be physically inert. He may sit for hours and not initiate spontaneous activity.	0	1	2	3	4	5	U
17. Global Rating of Avolition/Apathy Strong weight may be given to one or two prominent symptoms if particularly striking.	0	1	2	3	4	5	U

ANHEDONIA/ASOCIALITY

18. Recreational Interests and Activities The patient may have few or no interests. Both the quality and quantity of interests should be taken into account.	0	1	2	3	4	5	U
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U. SANS (Cont'd)

	<u>NONE</u>	—————▶					<u>SEVERE</u>	<u>UNK</u>
19. Sexual Activity The patient may show decrease in sexual interest and activity, or no enjoyment when active.	0	1	2	3	4	5	U	
20. Ability to Feel Intimacy and Closeness The patient may display an inability to form close or intimate relationships, especially with opposite sex and family.	0	1	2	3	4	5	U	
21. Relationships with Friends and Peers The patient may have few or no friends and may prefer to spend all his time isolated.	0	1	2	3	4	5	U	
22. Global Rating of Anhedonia/Asociality This rating should reflect overall severity, taking into account the patient's age, family status, etc.	0	1	2	3	4	5	U	

ATTENTION

23. Social Inattentiveness The patient appears uninvolved or unengaged. He may seem "spacey".	0	1	2	3	4	5	U
24. Inattentiveness During Mental Status Testing Refer to tests of "serial 7s" (at least five subtractions) and spelling "world" backwards.	0	1	2	3	4	5	U
25. Global Rating of Attention This rating should assess the patient's overall concentration, both clinically and on tests.	0	1	2	3	4	5	U

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